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ASIATIC CHOLERA.

*To the Editor of the Boston Medical and Surgical Journal.*

DEAR SIR,—I have to request the publication of the following article, in the Medical Journal. It is the report of the epidemic of cholera which occurred in the Massachusetts State Prison in 1832, made to the Governor of the Commonwealth by Dr. Walker, then Physician of the Prison.

This report was published in your Journal in January, 1833; but so large a number of physicians have come into practice since that time, that it is in the hands of comparatively few. I should ask you to republish it from your own Journal, but I wish to add some remarks, and have therefore taken the liberty to transcribe it.

Although our city government are taking measures to prepare the people to meet the disease in the most favorable manner, there are few means within the reach of physicians, of acquiring a thorough knowledge of its character and treatment. It is remarkable that Ticknor & Co., the medical booksellers in this city, have not a single copy of any work, old or new, on the subject. The Massachusetts Medical Society's Report on Cholera, which gave an analysis, with liberal extracts, of the best reports then made, is not now to be obtained.

I find Dr. Walker's report to be so clear an exposition of the disease, and so successful an instance of medical treatment, that it seems capable of supplying to a considerable extent the deficiency in our information. The paper is not perfect, nor can it supersede the necessity of consulting more thorough and exact works, when they can be obtained. The description is wanting in some important particulars: it does not give us the order in which the symptoms occurred, nor their duration; neither does it give any case in detail, which it would have been interesting and useful to do. The large number of cases which occurred during the first days precluded the possibility of recording them, but it is to be regretted that this was not done for the later ones. The pathological anatomy of the disease is not furnished in this report, for there was no fatal case. But the symptoms were so accurately observed and so clearly stated, and the treatment was so successful, that the report will well repay us for careful study.

As doubts were expressed at the time, of the identity of this affection with the Asiatic cholera, it may be well to sum up the principal facts, although the evidence is clear enough to make it almost a work of supererogation.

The epidemic began while cholera was prevailing in Canada, Albany, New York and Philadelphia; and within ten days before the first undoubted case occurred in Boston, and about the same time that cases were seen in other towns in the eastern part of Massachusetts.

Of all the symptoms which characterize cholera in its worst form, not one was absent excepting *cramps*; which did, however, occur in one of the worst cases. But the symptoms which express the essential character of the disease, those of serious obstruction of the circulation, were fully marked.

The careful analysis of the food which had been given to the prisoners on the day of the first attack, and the examination of the medicine shop, prove conclusively that no poison introduced into the stomach had any agency in the production of the symptoms. And when the disease continued to appear in new subjects, day after day, for nearly five weeks, all suspicion of such agencies was justly removed. The diet of all the prisoners was the same, while only part of them were seized; and again, the same diet was continued after the attack as before, with no injurious effects.

It must be allowed, then, that the disease was cholera. If it be said that it wanted some symptoms of that disease, it may be answered that wherever cholera prevails, there are many cases not fully developed, but sufficiently marked to entitle them to be classed with it. The affection was less severe in the Prison than it usually appears; and that it was not fatal in any case may be attributed to this, as well as to the facts that the subjects of the disease were in a position to be reported to the medical officer as soon as the slightest deviation from health was observed, and that active treatment was used at once.

I have copied the Report entire, although the introductory paragraphs might be somewhat abridged without impairing the history of the epidemic; but the preliminary measures taken by the Physician, at a time when the Prison might well be in a panic at the irruption of so severe a malady, advancing at the alarming rate of 115 patients in the first 24 hours, are so admirable an example of prompt and energetic action, that it is due to our profession to give its members the benefit of reading them.

Respectfully yours,

Boston, November 21, 1848.

WM. HENRY THAYER.

To His Excellency, Levi Lincoln, Governor, &c.

SIR,—On the evening of the 5th of August, about sun-setting, I received a message from the Warden of the State Prison, stating that many of the convicts were suffering severe pain, and requesting my attendance. I repaired immediately to the Prison, and found that two men had been removed to the hospital during the afternoon, that others had sickened, and that the disease was becoming general among them. My attention

was first drawn to several who had been taken from their cells, and placed in the gallery, that they might be more easily assisted. An examination of these cases convinced me that I had to do with a disease of no ordinary grade or character.

In answer to my inquiry what made them sick, they each informed me that they had been well up to that day, and knew not what had produced their malady. I next visited some in their cells, and found a remarkable similarity in all; that although the disease had but recently commenced, its effects had been truly wonderful and distressing. The contortions of countenance, writhing of body under pain, and outcries of suffering, issuing from every part of the Prison, presented a picture of distress, which, familiar as I have been with scenes of suffering at military hospitals, I have never seen equalled. The occasion required prompt and decisive measures—but here a difficulty presented itself. Night had arrived—as usual the Prison was under the care of the Warden and night watch of officers only, whilst its other officers were at their homes, or scattered about the town. The hospital was in another building some rods distant—there were no watchmen on the walls, and darkness might afford facilities for escape.

Under these circumstances, I advised with the Warden, and, in co-operation with him, executed the following plan of operations. First—a messenger was sent to summon the whole corps of officers to their posts. Second—the nurse was required to have all the beds in the hospital in readiness for the reception of the sick. Third—a man was sent round the Prison, with orders to inquire at every cell, and where he found a man sick, to take from him his water-can, and place a mark upon the door. Following close upon the heels of this messenger, I visited all the sick in their cells, encouraged them to bear their pains with fortitude, assured them the means of relief were at hand, and sorted out such as suffered most severely, and placed them together in the gallery. An officer was now directed to go round among the cells once in half an hour, and give a pill of opium to each man, until his sufferings should abate. The next object was to convey the sickest patients to the hospital; and I am happy to say, such was the state of discipline among the officers, and such their alacrity on this occasion, that the Warden had no difficulty in conveying the sick from Prison to Prison, nor in passing every necessary person or article without delay, and without at all endangering the safe keeping of the convicts, although the night watch of officers only was present during these operations. From this time, I am confident thirty minutes had not elapsed before we were able to send aid, courage and confidence, to the remotest cells of this extensive establishment. Having removed the first class of patients to the hospital, and prescribed for their cases, as will be explained by-and-by, I returned to the new Prison, examined all the sick in rotation, collected another class of patients, and had them conveyed to the hospital likewise. In this manner our time passed, until about 9 o'clock, when an officer could be spared to invite the medical gentlemen of this town and the city of Boston to attend and witness the disease. These gentlemen

were soon in attendance, and afforded us much relief by their advice and assistance. Soon after midnight, I made a report of the state of things to your Excellency, and early next morning addressed the following note to the Warden and Inspectors of the Prison:—

GENTLEMEN,—I feel it a duty to advise and request that an accurate chemical analysis be made, by some competent persons under your authority, of the remnants of food left from yesterday's ration, and likewise of the stools of the sick; and in a particular manner to inquire if they contain anything poisonous or deleterious to health.

Respectfully yours, &c., WILLIAM J. WALKER,  
*Monday morning, 7 o'clk, Aug. 6, 1832. Phys. Mass. S. Prison.*

P. S.—I have further to request, that an able apothecary may examine and weigh all the articles in the Dispensary—compare them with the prescriptions made, with the quantities purchased, and report any deficiency of medicines which might prove deleterious if mixed with food—and that his report be sealed, and not opened until the report of the analyzing committee.

I was prompted to the above course by the conviction that there might be those who would believe this disease had been produced by culpable negligence, in not securing healthy food for the convicts, or by poisonous articles mixed therewith; that important legislation or judicial proceedings might grow out of the case, and that it would be expected of the officers of this institution to establish the facts as they actually existed, and upon the most unquestionable authority.

In compliance with this note and instructions soon after received from your Excellency, the Inspectors employed Professor Webster, of Harvard College, to examine the utensils and premises of the Prison, and to analyze the food used by the convicts on the day preceding the appearance of the disease. They likewise employed Mr. Daniel White, of the firm of Samuel Kidder & Co., a highly respectable druggist of this town, to examine the medicines in the Dispensary of the Prison, and to report anything wrong in that department. These gentlemen have performed the duties assigned to them with their accustomed accuracy, as will be seen by their reports. At the same time, John Ware, M.D., and Joshua B. Flint, M.D., of Boston, and Josiah S. Hurd, M.D., of this town, were joined with me in consultation to attend the sick, and develop the true nature of the disease. To these gentlemen I shall always feel grateful for their kind attention and judicious advice on this occasion.

Having premised thus much, I shall proceed to record the phenomena which characterized the disease—the treatment adopted, with its success—its resemblance and discrepancy with certain diseases familiar to us—and, finally, to draw such inferences as to its origin and nature, as facts seem to warrant and require.

During the first 48 hours, there was neither pain in the head nor disturbance of the intellectual functions; but when fever supervened upon the primary affection, headache was among its concomitant symptoms. It likewise existed as a primary symptom in some of the cases which

commenced subsequent to the 6th of August. The air thrown out by expiration was in no case as warm as usual, and in some cases it was cold. The lungs could be inflated and emptied of air to the fullest extent, without increasing pain. The tone of voice was similar in all the cases, and such as to indicate severe suffering. The attitude chosen by the sick was recumbent, upon the back—head thrown backwards—arms not folded upon the epigastrium—legs drawn up with the heels close to the buttocks, so as to enable the patient to maintain a constant rocking of the body from side to side. The pain was confined to the abdomen. There was no permanent contraction of the abdominal muscles, nor did pressure on them either increase or diminish suffering. There was no flatulence—no tenesmus. During my whole attendance, I did not observe any spasmodic action of the abdominal muscles, or of the limbs. In one case, treated by Dr. Hurd, spasmodic motions were observed; and another patient told me, some days after, that, during his sickness, he could not prevent his legs from starting and suddenly drawing up. The countenance was pallid; the features contracted, and somewhat distorted; the skin was cool in all, and in some cases it was cold; it was not sweaty or unctuous; the thirst was insatiable and distressing; the tongue was not coated, but was somewhat exsanguinous, and inclined to a sub-livid color; its temperature varied much and often, at one time it would be but little below its natural temperature—at another, cool—and again, cold; its greatest degree of coldness equalled that of the flesh or blood of a cold-blooded animal, or what we experience when we place our hand on a wall recently drenched by a summer shower. During the progress of this disease, the tongue was seldom found to be coated; it was sometimes whitish, but generally of a cherry red—not smooth or swollen, but retaining its usual villous appearance, and differing from a natural state mostly in color. The taste was not bitter or nauseous. A disposition to vomit was common to all. The quantity of matter thrown from the stomach, however, was small; and, excepting in a few cases where food was discharged, consisted of a white tenacious liquid, unmixed with bile, acidities, or anything likely to provoke vomiting. The evacuations by stool consisted, at first, of healthy natural fæces—next, a brownish liquid, changing to a pink, being tinged with blood, after the disease had continued a considerable time. There were, however, no coagula of blood, bile, or undigested food, to be found in them. In a few cases, these stools were succeeded by others, having the appearance and consistence of cream. I have since queried with myself if this might not have been pure chyle, thrown back upon the intestines by an inverted action of the chyloferous vessels. The quantity evacuated was great in all cases—in some it was enormous; most of them filled their night-buckets, which contain more than ten pounds of water, by weight; many filled them twice, while some filled them partly full the third time. We are therefore warranted in saying, that the bodies of many of the convicts were lightened twenty pounds within a few hours; for it must be remembered, that all liquids were removed from them as soon as possible after the outbreaking of the disease.

The pulse was exceedingly affected and variable; at one time it would be full, hard, quick and bounding—then small, wiry, hard and creeping; again, it could with difficulty be felt at the wrist, or not at all; when it could be felt, it was uniformly hard, and such as to indicate prompt and copious bloodletting; and when relief was obtained, it became preternaturally slow. The remedies employed at the commencement of this disease, were entire abstinence from liquids, frictions of the skin, external warmth, opium and bloodletting. By abstinence from liquids, we were enabled to keep opium on the stomach, as well as to lessen the disposition to vomit and purge. By friction and external warmth, we were enabled in some measure to restore the circulation and natural warmth of the body, and give opportunities for practising more efficient remedies. By the prompt and liberal use of opium, many of the milder cases were so far relieved as to require only diet, rest and occasional laxatives, for their cure. In other cases, its use relieved pain, diminished vomiting and purging, promoted warmth, and proved a valuable auxiliary to other remedies. The quantity of opium dispensed at a dose was about three grains, and at intervals of thirty minutes. The greatest aggregate quantity taken by any individual, I should think, was about twenty grains, or equal to five hundred drops of laudanum. As, at first, the most severe cases were treated by bloodletting—and as, from time to time, those suffering the greatest pain were subjected to the same remedy, and promptly relieved by it, we cannot say there were or were not some cases which might have wholly resisted the curative powers of opium. Certain it is, however, that opium relieved pain, and suspended the symptoms for a while, in many cases, where, at the end of twenty-four to forty-eight hours, the disease returned. In practising venesection under symptoms as above stated, I anticipated much difficulty in obtaining a ready and sufficient evacuation of blood. There was, however, but one case in which frictions and extensive incisions into the veins did not enable us to obtain the requisite quantity. Had we been some hours later after the invasion of the disease, I fear it would have been otherwise. The case of exception, above alluded to, was treated by my friend, Dr. Hurd, who represents that he found the man cold and pulseless, with spasmodic action of the muscles of the legs, and all the appearance of approaching dissolution. Under these circumstances he attempted venesection at the arm, but without success. He next opened the temporal artery, and obtained blood of a darker color than is common to arteries. The blood at first merely trickled down the temple; after eight or ten minutes it flowed more freely, and of a better color; in about thirty minutes a sufficient quantity was obtained, and the man relieved. That the difficulty of obtaining blood in this case depended upon the state of circulation, and not upon peculiar organization, or insufficient incision in the vessel, is clearly proved by the facts that the artery was opened immediately anterior to the ear—that towards the close of the operation the blood became of a vermilion color, flowed in a full stream—and that several copious secondary hæmorrhages occurred on subsequent days, and required much care to re-

strain. When practised at the commencement of the disease, bleeding was followed by immediate and perfect relief—so much so, that men with skin and tongue cold, and pulse absent or scarcely perceptible, were entirely relieved by the loss of from sixteen to thirty-two ounces of blood; the pain was alleviated, vomiting and diarrhœa removed, and the disease, as it were, extinguished. Hence it occurred, that those who were most severely attacked, were not only soonest relieved from suffering, but speedily restored to health; while those whose cases were trusted to opium, and not relieved by it, or for other reasons not bled at the commencement, passed into a new state of disease, characterized by headache, pain and soreness of the epigastrium, thirst, dysuria, diarrhœa of a mucous character, with skin and pulse approaching to what is above related—but alternating with occasional flushes of fever and febrile development of pulse. For the removal of these symptoms, we were constrained not only to bleed, but to repeat the operation at intervals for some weeks—to give occasional laxatives, blister and apply moxas, maintain the most rigid diet, with demulcent drinks—have recourse to opiate enemata for the removal of diarrhœa; and frequently to see our patients thrown back into their former state by trivial accidents or imprudence.

The whole number of convicts attacked with this complaint was 196; of this number, 115 sickened within the first twenty-four hours, and the remaining 81 at various times after. The last patient severely attacked was on the 7th of September—and the last discharged from the hospital, cured of this malady, on the 23d of October, having resided in the hospital 79 days. Thus the whole number finally recovered, notwithstanding the severity of the first symptoms, and the protracted sufferings of those whose disease was not wholly arrested by rigid treatment at the commencement.

Having said thus much of the treatment, we naturally come to the inquiry—what was the disease, and what were its causes? If we compare it with the various diseases of the abdomen, which most nearly resemble it—such as inflammation of the peritoneum or viscera of the abdominal cavity, spasmodic affections, icterus, colic, colica pictonum, cholera morbus, dysentery, or with the effects of corrosive poisons taken into the stomach—we shall find, in each of these complaints, striking symptoms not noticed in this; while here, the excessive purging, coldness and state of the pulse, are symptoms not common to any disease with which we are familiar in this part of the globe. In searching for local causes, we have been equally unsuccessful. The diet of the convicts, always plain and wholesome, has received particular attention during the present season; the use of old potatoes had been dispensed with, and rice substituted in its stead. The ventilation of the Prison, which had proved sufficient in former years, had been much increased—while the cleanliness of person and habitation, required and maintained by the authorities of the Prison, is not surpassed in the comfortable dwellings of our country. The most careful examinations, made by the Inspectors, as well as by every officer of the institution, could discover nothing poisonous in or about the diet or premises of the Prison:—none was found

by chemical analysis; nor could the complaint have had its origin in a poisonous principle, sometimes accidentally present in food usually healthy—such as shell fish, cheese, partridges, &c.—since the same parcels of food were used on subsequent days, without the recurrence of similar effects. It is true, that certain articles, the class of acrid poisons—such as elaterium, croton oil, and perhaps others, in undue doses, might produce excessive purging, with nausea; yet we have no reason to believe that the quantity evacuated could be so great, of such appearance, or relieved by the same means. The same observations will hold good as to the various articles of the *materia medica*; and, for still stronger reasons, are they true as respects the remaining classes of poisons, usually denominated astringent, narcotic, narcotico-acrid, and septic—since poisons produce their specific effects on the human body, and no other, as surely as any other agents; and when articles of these classes are taken into the body, they do not produce vomiting and purging, but symptoms widely different. Thus we see that spurred rye, which belongs to the class of narcotico-acrid poisons, could have no agency in producing this disease, even if it had been found in much greater quantity than is mentioned in the report of the Inspectors—52 grains being found in  $1\frac{3}{4}$  bushels of sound grain. But since this substance has been frequently, though, as I believe, unjustly, considered the cause of other epidemic diseases in our country—and as a belief in this opinion is calculated to do much injury in a community so largely nourished by this grain, I trust I may be excused for saying the subject has been fully studied—that spurred rye has been found to produce the same effects on man as other animals—and that experiments on inferior animals prove, that when they are fed upon it for five or six weeks, death ensues, and is attended with gangrenous spots upon the surface and internal viscera, and mortification of the extremities; but to produce this effect, one third of their food must consist of spurred rye. Experiment likewise teaches that a very large dose taken at once may produce convulsions, other nervous symptoms, and death. I will merely add, that I have verified these experiments, and found a dose of sixty grains necessary to destroy so small an animal as a pigeon; and that this dose sometimes fails; that a small rat having eaten ninety-five grains in thirteen days, died in convulsions, and that mortification had commenced at the end of his tail; that chickens may eat thirty grains per day, for weeks, without apparent injury; that I have known thirty, forty, sixty and eighty grains taken at a time by different individuals of the human family, with only producing slight temporary inconvenience. From the above it will be readily granted, that the small quantity of spurs found among the rye of our country, cannot be considered as dangerous to life, or even prejudicial to health. From the above considerations, I feel warranted in inferring that the late disease at the Prison was not produced by improper food, or poisonous articles mixed therewith; that it was not a disease common among us, but an epidemic of peculiar character, originating in some atmospheric or telluric causes, which we can neither explain, appreciate nor control.

WILLIAM J. WALKER, *Phys. Mass. State Prison.*

To this report were added, when it appeared in this Journal, the concurrence of Drs. Ware, Hurd and Flint, in the accuracy of Dr. Walker's statement; and also extracts from the report of the Inspectors of the Prison, showing that Dr. Webster had examined by chemical analysis the food of the convicts, and detected no poisonous substances in it; that the apothecary had found no deficiency in the store of medicines; that the ergot taken from the barrel of rye belonging to the Prison had been examined by Drs. Bigelow, Channing and Ware, and was by them stated to be "less than is ordinarily found in the same quantity of good merchantable rye, being less than a grain, by weight, to a quart."

W. H. T.

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AN ADDRESS DELIVERED BEFORE THE MANHATTAN MEDICAL  
ASSOCIATION, NOV. 2d, 1848,

BY THE PRESIDENT, CLARKSON T. COLLINS, M.D., FELLOW OF THE NEW YORK ACADEMY OF MEDICINE, AND FORMERLY EDITOR OF THE N. Y. MED. AND SUR. REPORTER.

[Communicated for the Boston Medical and Surgical Journal.]

GENTLEMEN,—The period for our regular meeting has again arrived—we have assembled for the cultivation of a more intimate acquaintance with each other and the mutual advancement of our professional interests.

Such associations, by identifying us as brethren, cannot fail to prove lastingly beneficial to us, and to subserve effectually the true objects of our peculiar calling. They not only unite our sympathies, but elevate our intellectual characters; and by increasing our professional knowledge, benefit especially those of our fellow creatures who become the subjects of our care and solicitude. It is to associations of this kind that we may look for a higher tone of medical ethics. Here is a union of effort, for all are alike interested in the objects of the Society, and every member, from his daily intercourse with the sick, gathers practical facts of peculiar interest; and like the honey-bee conveys his burthen to the *common* stock, for the *common* good. What can be more fully calculated to accomplish those desirable ends at which I have hinted, than associations of this kind—based upon such motives? A personal standard of professional excellence each would attain; but it is by such means that the whole fraternity may enjoy with him the fruits of his labors. Indeed it is only by carrying out fully the principles of our organization, and establishing a reciprocal and cordial interchange of practical observation, that we are to reap the full benefit of our connection and support the dignity of our profession.

It is an obvious fact, that we, as a body, do not receive from society that sympathy and support so justly our due. Some waggish writer has perpetrated the following witticism, which seems to contain more truth than fiction:

"God and the Doctor we alike adore,  
But only when in danger, not before;  
The danger past, both are alike requited,  
God is forgotten and the Doctor slighted."

To what cause shall we attribute this fact? Is it that the profession neglect in any way the performance of their painful and often most disgusting duties? Does the friend of humanity now dread to combat disease in its most deadly array? Does he shun its foulest and most disgusting dens? No: unwavering in his noble undertaking, we see him as heretofore, snatching from the very jaws of death the miserable victim; and with self-sacrificing energy he continues his toilsome rounds. Compare his labors of the past year, in staying the ravages of the ship or typhus fever, and other similar diseases, with those of preceding years, and you find him still the same, a *man of toil*. You still see him striving to attain those means by which he may best fulfil the Divine command, "Go, heal the sick."

Is it that the public mind is insensible to claims upon its liberality? This is not the case. The shouts of applause that welcomed to their quiet homes, and domestic endearments, those brave soldiers of our *Republic*, who have prostrated her foes, and wreathed her arms with proud and imperishable laurels, has scarcely subsided. The bugle note of fame that shall herald their names to posterity, still sounds in our ears. And we would not utter a discordant murmur—we rejoice at their success, we would not pluck a leaf from the bays that wreath their brows. Yet how is it that the physician, who has resisted, and that, too, successfully, the approach of an enemy more terrible than the legions of Mexico—whose approach caused the stoutest heart to throb, and struck with palor the most undaunted countenance, has unnoticed and uncared-for pursued his warfare; and in conquest heard no note of applause, save the murmur of gratitude that has fallen from the lips of the wretched sufferer—no reward but an approving conscience. *And he is satisfied*, could he have in addition the public confidence, and that protection the physician, of all men, most needs.

Why is it that this support and protection have been withdrawn? Is it not to be attributed to the presence in society of so many pretenders in the science—so many of that vermin of the *quack species*, which every physician must heartily detest—and to the fact that so many *pill venders, sarsaparilla makers, cancer, steam and cayenne pepper doctors*, and inventors of *all-healing ointment*, and elixirs of life, have so often deluded the public, and humbugged them out of their money, that they have lost the power of discriminating between real and pretended merit? The hydropath, with characteristic modesty, has urged the claims of *cold water*. He has referred to the lore of antiquity—dwelt long upon the aquatic habits of the refined Romans, and the hardy Greeks, and with the timely assistance of some interested, but deluded friends, he has succeeded in persuading the invalid to be *doused* and *blanketed* according to the theory of the ignorant Priessnitz, the hero of Gräffenburg. The homœopath, too, claims attention—discoursing right eloquently upon the advantages of *his practice*—the harmlessness of *his doses*, and the certainty of their operation. Then follows a tirade upon the murderous practice of the allopaths, as they are significantly termed, by these *refined gentlemen*. Here, too, there are influences operating against us

from a higher source. Some clerical gentlemen, whose judgments, perhaps, have been flattered by addresses well suited to those of classical taste and a limited knowledge, even, of the first principles of pathology or medicine, so far forget their true calling as to advise a trial of this *imported* absurdity. Often the tastes of children and fastidious females are consulted, who, of course, prefer *sugar pills* and infinitesimal doses. Besides, the race of Judas Iscariot is not yet extinct—for there are those who (if they would not sell the Saviour for thirty pieces of silver) are found ready to exchange their standing in the profession (by which they can at least make an honest subsistence) for an easier and more ready way to wealth. To such men, money seems to answer an admirable end—compensating for loss of standing or reputation. It is, in fact, to them, a good article to take dark spots out of character.

To such our attention is frequently directed, as men who are keeping pace with the spirit of the age, by those who, incapable or unwilling to judge for themselves, are readily made to believe that the science of medicine, like the many vague and undefined theories of the day, must give place to something of more recent date. Such persons cannot appreciate the fact, that our science is based upon a durable foundation; that for centuries it has remained upon the same basis—a splendid superstructure, *not perfected*, but *receiving*, and *destined to receive*, touches of skill from the masters that shall more fully develop its beauties, and enhance the interest with which it is already surrounded; and after the puny creations of Thomson, Priessnitz and Hahnemann have vanished, like some of their predecessors, shall remain an established and noble science.

This may with propriety be called the reign of quackery—the public are not allowed to recover from the novel effects of one *discovery*, before another is brought forth. Now a domestic remedy is curing its thousands—now an imported nostrum is astounding the world with its unparalleled success—every disease is cured by one remedy—another, more modest, assumes less. In this way thousands are yearly destroyed—if not by these nostrums, by some ignorant practitioner, or lack of proper treatment. An investigation of the means by which these men bring themselves into notice, and an exposure of some of the most glaring popular deceptions of quackery, would not fail to interest and repay the inquirer. I will now relate a few facts, as they have fallen under my observation.

A man in this city who makes considerable noise as a homœopathic physician, calls himself a graduate in medicine; yet from the strictest inquiry, I find that the most intimate of his acquaintance never knew of his studying any work on medicine, or any of its branches—but on the contrary he was, up to a late period, employed as an under workman in an artist's shop; and from that situation entered society as a practitioner of medicine (to be called upon by the unsuspecting in urgent and dangerous cases), having the audacity to assume the affix of M.D. And this man finds plenty of employment—is accumulating wealth, and is by some of the good people considered a public *benefactor*.

"If the sick gudgeons to the bait attend,  
And come in shoals, the angler gains his end."

Pardon me, gentlemen, for alluding to another case ; that of one of the most extensive practitioners of homœopathy in this city—a man who a few years ago occupied a very *memorable* position in the regular profession, but who now drives about our streets in splendid style. He employs, or did, up to a late period, a regular practitioner in his family, who from regard to the wife and children was induced to attend them professionally. Dr. Homœopathy, some time since, walked, late at night, to the house of *his family* physician, and rang the bell. Dr. Allopathy, from the window, inquired who it was. Dr. H. replied, stating that one of his children had a slight attack of croup—and desired him to go and see it. Dr. A. remarked, that having been unwell for a few days past himself, he did not like to go out ; and, said he, "as the child is not dangerously ill, suppose you go home and give it some homœopathic medicine, and I will go round in the morning." Said Dr. H., "do you think I am a — fool."

Another homœopath, formerly of the regular practice, and somewhat celebrated for his *piety*, but who by some of the less charitable of his brethren is thought to practise a little hypocrisy to accomplish his purposes, finding his wife dangerously ill, and having tried in vain to subdue the disease by his *most refined treatment*—became alarmed and applied to a regular practitioner ; who so far violated the rules of our body as to respond to the summons. After prescribing for the lady, he asked the homœopath, "had the patient been any one but your own wife, would you have sent for a physician of the old school ?" He at first evaded the question, but finally replied, "*I would not.*" Or, in other words, he admitted that he would have sacrificed the life of a human being at the shrine of *quackery*, rather than so far humiliate himself as to ask the advice of those whose advantages are superior to his own.

I will relate one more circumstance of this kind. A lady calling upon me a short time since, stated that having been troubled with an urgent cough for some months, by the advice of some of her *interested* friends she had been induced to place herself under the care of a homœopath, who told her that her lungs had been diseased for a long time, but assured her that by the use of his medicine they could be *healed*. She continued to take the sugar pill regularly for a considerable time, and finally told him that her cough grew worse, instead of better, and that she had a continued tickling in her throat. He gravely assured her that it was only the *powerful* effects of his medicine, *working* a radical cure, and *hunting out the disease*, the very result he wanted. When she came under my care, I removed about half an inch of her *palate*, by which simple treatment she was soon relieved, and has not been troubled since with a cough.

These are a few of the many facts which are continually developed in our city ; and these, I think, are sufficient to direct our attention to the real cause of public neglect to the *claims* of our *profession* ; and the establishment of laws calculated to aid us in our labors in promoting the health of society.

I need not at this time advert to the necessity, in a city like ours, of a well-regulated medical police, to guard the public health, and carry out sanitary improvements upon hygienic principles; but you well know the obstacles to such a regulation.

That the inhabitants of this city may be visited with that scourge of the world, the Asiatic cholera, in another year, seems (to me) not at all unlikely. I judge only from the past. This frightful malady, which is of comparatively recent date in this country, has, as you all know, been long an epidemic in Hindostan. It commenced anew on the 19th of August, 1817, at Jessore, about 100 miles northeast of Calcutta. A Hindoo was attacked with violent vomiting and purging, and died on the following day, when 17 more expired suddenly of the same symptoms. After that it became general throughout the town. It reached Calcutta in the following September, where it raged with great severity during the whole of 1818, and also pervaded the provinces of northern and eastern Bengal. In 1819 it went into Ceylon, Malacca, Java and Siam. In 1820 it invaded China; in 1821, Muscat, and destroyed in the city of Bassorah 50,000 persons. In 1822 it showed itself in Turkey, along the Caspian Sea. In 1829 it suddenly broke out in Russia, and was attended with great fatality. In 1830 it invaded Poland, Austria, and the coast of the German Ocean. In 1831 it reached Hamburg, and made its appearance in England in January of the same year. In 1832 it passed into Scotland, Ireland, France, and made its debut on this side of the Atlantic, in Quebec, on the 8th of June; on the 21st of that month, it suddenly appeared in New York city, and subsequently in the principal cities in the United States during that year. In 1834 it re-appeared in many of the cities in this country. It also visited some of the cities of France and Italy, during the years 1835, 1836 and 1837.

God forbid that, following its former course, it shall re-appear in our midst, or that public neglect shall lend new terrors to its ravages. Yet should it come, and in all its terrors, I doubt not there will be found in our ranks, in a large proportion to our numbers, men ready not only to *sacrifice enjoyment and personal interest*, but to *peril even life itself* in responding to the calls of the distressed. Then shall this Association be a *school of personal observation*, from which we shall derive that *assistance and confidence* which will conduce to the most desirable ends, and whose lessons, like beacon lights, shall direct our way.

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#### AMPUTATION AT THE SHOULDER-JOINT, FOR GUN-SHOT WOUND.

BY PAUL F. EVE, PROFESSOR OF SURGERY IN THE MEDICAL COLLEGE OF GEORGIA.

ON the 11th of February, 1848, I removed the arm at the shoulder-joint of a black boy, who had about 48 hours previous been accidentally shot. The discharge from the gun was received at a distance of only a few feet; it was loaded with squirrel shot, and tow was used for the wadding. This occurred in a neighboring county, and the patient was

sent to Augusta by the rail-road. Dr. Beggs, who saw him soon after the gun-shot wound was made, removed the tow, with some of the shot, and restrained the hæmorrhage, represented to have been considerable. The wound presented an irregular ovoidal opening, of an inch to an inch and a half in diameter, upon the upper outer surface of the left arm, about an inch below the acromion process of the scapula, and the shot, after cutting the os humeri nearly in two, passed in the direction of the shoulder-joint and subclavian artery. His pulse, when I first saw him, was over 100; his fingers of the injured side he said were benumbed, and he complained of pain in the region of the wound. The arteries of the left upper extremity pulsated distinctly; the age of the patient was 11; his general health good. His bowels had been moved with salts, and 50 drops of laudanum had also been given to procure ease and sleep.

Amputation at the shoulder-joint having been decided upon in consultation, assisted by Dr. Dugas, who by pressure upon the subclavian artery effectually controlled the circulation, and Dr. Means, who administered the chloroform, in the presence of the class in attendance at our College, the heel of the amputating knife was applied upon the anterior edge of the acromion, and by a continuous sweep around the head of the os humeri, two flaps, one anteriorly and the other posteriorly, were made, and the operation completed by ligating four or five arteries. In carrying the elbow forward, to throw the head of the bone backwards so that the knife might the more easily pass through the joint, the humerus was fractured, so near was its complete division by the shot, which must have entered *en masse*. The time consumed in the amputation, was thus increased by this fracture, but the longest estimate of those present was 22 seconds.

The insensibility produced by the chloroform was extremely satisfactory; the operation having been performed and the dressing applied without the knowledge of the patient. He was sitting up on the fourth, and left the surgical infirmary on the seventh day.

With the exception of some delay from the shortness of the flaps, owing to the destruction of the deltoid muscle by the wound, the discharge of a few shot from it, and some fever created or rather aggravated by worms, he had a good recovery, and is now a hearty, well boy.—*South. Med. and Surg. Journal*.

#### MORTIFICATION OF THE CHEEK FROM FRACTURE OF THE INFERIOR MAXILLARY BONE.

BY W. H. STILWELL, M.D., OF SOUTH GIBSON, TENN.

In exemplification of the danger to be apprehended from the careless extraction of teeth during the exhibition of mercury, permit me to relate a fact which recently occurred under my observation.

A. P. applied to a *blacksmith* to have the second molar tooth on the right side of the lower jaw extracted. The key was used, and the ope-

ration attended with much pain. In the evening of the same day P. took a dose of calomel, which purged as usual. In two or three days, however, the gums and cheek on the affected side became tender and greatly swollen, there was slight ptialism, with mercurial fetor, but nothing was done to procure relief until the ninth or tenth day, when medical aid was sought. At this time the face and head were enormously swollen; the right eye closed; profuse discharge of tenacious saliva; dreadful fetor; skin hot and dry; pulse frequent, and a deep black spot, the size of a twenty-five cent piece, had appeared upon the cheek exactly opposite the recently-evacuated socket. Mortification had commenced.

General antiphlogistic measures were promptly resorted to, and washes of solution of argent nit. were employed. Every means, in short, which could be devised to subdue the inflammatory action were put in requisition for the space of ten days, when the destructive process was, at length, slowly arrested, after the loss by sphacelus of the whole soft cheek, from the middle of the upper lip upward to the *alæ nasi*; thence backward along the middle of the zygomatic arch, destroying the temporal muscles, laying bare the condyloid process, opening the fauces; thence down behind the angle of the jaw, uncovering the parotid gland, *one half of which was destroyed*, passing just in front of the ear; thence along the lower margin of the jaw bone to the centre of the chin. This whole mass was removed at once; though the sloughing process continued for some time, burrowing deeply behind the angle, until finally some arterial branch was ruptured and alarming hæmorrhage threatened the patient's life, but was happily arrested by the application of nitric acid. At this time, on pressing the bottom of the ulcer with the point of the finger, the carotid artery could be felt, and its beatings were frightful. The patient was now reduced so low by fever, hæmorrhage and hectic, that it seemed almost an impossibility to save him; but by the use of tonics and nutritious food he slowly regained strength, and six weeks after the extraction of the tooth, the outer half of the inferior maxillary bone, from the chin back to the angle, with the whole of the coronoid and condyloid processes, was lifted off and removed, splitting in its whole length along the track of the alveoli, having evidently been fractured longitudinally by the tooth-key.

It has been proposed to repair the consequent deformity by an autoplasmic operation, but the patient refuses to submit to this. Mastication is imperfectly performed by the help of the muscles of the opposite side, and much trouble is experienced from the saliva and ingesta finding their way out through the breach in the cheek.—*West. Jour. of Med. and Surg.*

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 THE BOSTON MEDICAL AND SURGICAL JOURNAL.
 

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 BOSTON, DECEMBER 6, 1848.
 

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*Report on Idiocy.*—A supplement to a report presented to the Legislature of Massachusetts, last season, has been published, and furnishes a vast amount of information on the subject of idiocy, brought together from various sources, and so arranged that the document is exceedingly instructive. A high tone of moral sentiment runs through it, which gives a dignity and importance to the melancholy history of individual cases which are introduced to illustrate the value of elementary schooling, of some sort, for idiots.

"Idiocy," says the writer, "is found in all civilized nations, but it is not an evil necessarily inherent in society; it is not an accident; and much less is it a special dispensation of Providence. To suppose it can be so, is an insult to the Majesty of Heaven. No, it is merely the result of a violation of natural laws which are simple, clear and beautiful; which require only to be seen and known, in order to be loved; and which, if strictly observed for two or three generations, would totally remove from any family, however predisposed to insanity, or idiocy, all possibility of its recurrence."

No scientific investigation is attempted, to prove the fact of hereditary transmission; nor, indeed, is it at all necessary, as its existence is both admitted and felt to be true in the commonest walks of life. Physical defects of a certain description, as well as the conditions of the mind, have their origin in the parental stock, and the distortion goes on increasing, from one age to another, if the disturbing causes are not removed. Hence insanity, idiocy, and other morbid peculiarities of the mind, are in most instances to be traced to ancestral sources. A more able dissertation has not appeared for a long while; and it must unquestionably exercise a commanding influence over the opinions of legislators, in acting upon the moral and physical necessities of the poor, long-forsaken objects, whose claims are both eloquently and philosophically advocated in this learned supplementary paper.

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*Dr. Yandell's Introductory Lecture—Preparatory Education.*—With characteristic courtesy, Dr. Yandell, when invited by the students, permitted them to publish his introductory discourse, delivered at the medical institution in Louisville, Ky., Oct. 18th. In compliance with the recommendation of the American Medical Association, the lecture term at the Louisville School has been extended, and commenced two weeks earlier than in former years.

After properly opening the way to an acquaintance with the great company with which he found himself surrounded, the professor very appropriately directed their attention to the subject of a preparatory education. Now it is necessary, in order to understand a certain class of subjects, supposed to call forth a high order of intellectual effort, that the mind should have been previously disciplined in a certain orderly manner, that it may comprehend the value and true import of those subjects. In what

way should those who propose to study medicine, prepare themselves? Does an acquaintance with the Latin and Greek languages suffice? Is it worth while to become adroit in mathematics or any other collateral branch of a finished academical education, before commencing professional readings? Of the advantages to be realized through life, from an accomplished collegiate training, no one in his senses will pretend to be in doubt; and since it is true that the more one has in his head, the less he will have to do with his hands, it should be early impressed on youth, that no progress towards distinction can be made without education. But Dr. Yandell's inquiry seems to be this,—how shall the languages be acquired, without wasting such a portion of life in the worst form of drudgery? He quotes the opinions of Milton and Locke, who were both convinced that the method in their day of teaching was tedious, uninviting, and absurd. Is it any better at this period—two hundred years later? If the professor had finally told us what to do, with reference to making the acquisition of Greek and Latin easier, he would have conferred a special favor on a multitude of students. But, like the Hudibrastic story of the bear and fiddle, his instructions are left unfinished, in the middle,—unless this sentence embraces his views *in extenso*:—"With the American Association, therefore, we hold to the Latin and Greek, but would have them acquired by a more rational and easier process, and would connect with them the study of other things, which can be easily done—as, for example, the various branches of natural history, so that while the boy was engaged in the irksome business of learning words, he should be gaining a knowledge of objects useful to be known."

Whatever is said in this discourse of the progress of medicine, embracing some excellent observations on the discovery of etherization and the onward march of the science of medicine, meets our cordial approval. So of the geological deductions towards the close. Without being a stiff, cold, buckram kind of a preliminary lecture, it abounds with life and encouragements; and without a particle of the anodyne in its composition, must have been well received, as it deserved to be, by an intelligent, discriminating body of medical students.

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*Honor of Discovery.*—Within a little time there has been a revival here in Boston of the grave question—Who discovered etherization? It will be recollected that \$1000, enclosed in a silver box, were presented to Dr. Morton, as compensation to some extent, as we understood it, for his labors and losses in experimenting, &c. with sulphuric ether. A series of notes have appeared in the Boston papers, from some of the gentlemen who contributed to the thousand dollar donation, who explicitly declare that they understood that Dr. Morton was poor and embarrassed, and the sums they gave were in charity, without any reference to etherization, or his claims to the honor of discovery. Dr. Jackson addressed notes to those whose names were prominent on the list of donors, which brought out these facts in reply. In the mean while, the gentleman who carried round the paper, it would seem, from the published account, thought that those on whom he called knew perfectly well what they were doing. Some read it, and others did not; although, with characteristic liberality, no one refused to be charitable. Thus the affair rests for the present; and since he who wins may laugh, the man who got the silver casket, containing the cash, is in luck, aside from the consideration of merit. Dr. Jackson is a profound chemist,

and his claims to the distinction of being the true and only discoverer of anæsthetic agents, which have entirely modified the practice of surgery in all countries, will not be relinquished, while the possibility remains of sustaining them.

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*Preservation and Restoration of Sight.*—A person has located himself in Boston, who has obtained celebrity among those suffering from imperfect vision, arising from disease, but more particularly from the effects of age. Among the curative efforts, about which people advanced in life manifest the most solicitude, are certain manipulations intended to do away with the use of spectacles. Having been frequently consulted on this subject, we have been obliged to say that the medical profession, as far as our acquaintance extends, have never succeeded in their attempts to accomplish that gratifying desideratum. If any process has been discovered to keep the transparent cornea always at the same convexity, the practitioners of medicine would be glad to know it. It seems to be a physical impossibility, at war with the very laws of animal organization; and yet the operation is spoken of as a fixed fact, of public notoriety.

Without a distinct knowledge of the manner of operation, and a clear illustration of the permanency of the effects produced by the operator, it would be very improper to recommend patients to visit his establishment; and it would be equally unjust to condemn the course he is pursuing, without being firmly convinced of its inutility. Under such circumstances, if any correspondent of the Journal could furnish the necessary light, he will much oblige many who are in pursuit of correct information in regard to the subject.

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*Marriages and Deaths in Buffalo.*—The Buffalo Commercial Advertiser gives the following statement of marriages and deaths in this city for the year ending August 8th, 1848. The data; it is stated, have been obtained by Mr. E. W. Palmer, from clergymen, justices of the peace, sextons, &c.

The whole number of marriages is 791. Of this number, 501 have been by the German and French clergymen of the city.

The whole number of deaths, as reported by the several sextons, is 1,499. In addition to this number, it is estimated that there were about 50 private burials. This makes an average of about 30 per week; or, 1 in 1500, estimating our population at 45,000. [Or 1 in 29 for the whole year.]

The Advertiser adds, that "during the time embraced, the mortality of the city has been made greater than usual by temporary causes. The ship fever and smallpox prevailed to considerable extent last autumn, and carried off quite a large number, soon after their arrival here, of emigrants, who had not become citizens. This is shown in the report of between 300 and 400 paupers, who were buried at the expense of the city."—*Buffalo (N. Y.) Medical Journal.*

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*Medical Schools in Russia.*—The medical schools of Russia are carried on in a grand and becoming manner, and they are plentifully supplied in every respect. The studies must extend over five years, each year begin-

ning in August and terminating in June. The whole of May is given up to examinations; all the courses last the full year, and every student is obliged to attend them, irrespectively of the peculiar branch of medical science he may wish to study. There are six *censures*, or examinations. If the candidate do not give satisfaction with the first three, he is put back for one year; but when he has creditably passed five, he obtains his doctor's degree. The sixth is only attempted by those who are looking for state appointments. The fourth and fifth years are especially dedicated to clinical instruction; after which the young men may settle in any part of the empire.—*London Lancet*.

*Hygienic Popular Tracts*.—A gold medal of the value of £12 will be adjudged in 1850 by the Academy of Sciences, Arts, &c., of Rouen, to the author of the best treatise on popular hygiene, free from theoretical speculation, and adapted for the use of the working classes and agriculturists.—*Ibid*.

*Medical Miscellany*.—Mr. John Peacock, of Jacksonville, Florida, at the great age of 106, voted at the polls on the late presidential election.—Mr. Charles White, of Vassalboro', Me., who will be 99 in February, also voted on the same exciting occasion.—The papers give an animated account of a new medical school, in the process of formation in Boston, for the instruction of females in medical matters pertaining to themselves.—The last number of the London Medical Times, in an article on the re-appearance of the scurvy, and alluding to its having been on board the Raritan, Potomac and Falmouth, while operating in the Gulf, says the American nation should demand the dismissal of the medical staff connected with our naval service.—The charcoal porters and venders are said to escape the cholera.—The Coroner in New York recently held an inquest over the body of Sarah Gedney, an Indian, who died suddenly in that city, of old age. She was 107.—Mrs. Smith, of Jermyn House, near Romsey, was poisoned on the 4th ult., owing to a chemist, named Jones, giving her one kind of medicine for another. The coroner's jury returned a verdict of manslaughter against Jones, and he has been committed to prison.—Dr. Thomas Van Buren, of New York, was instantly killed on Monday, by falling between the ferryboat and dock, in crossing from Brooklyn.—The papers report that a lad, 14 years old, named Daniel Burchill, in Yorkville, near New York, who was bitten by a mad dog about three months since, died on Wednesday night from hydrophobia. He was attacked on Tuesday, and a physician who was called prescribed calomel and ipecac. On Wednesday morning the symptoms of hydrophobia were unmistakably developed, and chloroform was administered with good effects. The spasms were entirely relieved, and the patient drank flax-seed tea without the slightest repugnance. Yet he died about 10 o'clock, apparently perfectly easy, having been free from spasms seven hours.

TO CORRESPONDENTS.—The report of a case of severe injury of the head, by Dr. Harlow, alluded to in last week's Journal, has been received, and will be published next week.

MARRIED.—Dr. Geo. Jewett, of Baldwinville, Mass., to Miss M. E. Saunders.—John Schue, M.D., of Hartford, Conn., to Miss C. A. Goodwin.

DIED.—At New Hartford, Josiah C. Banning, M.D., 52.—At Bloomington, Indiana, Dr. J. O. McKenny.

*Report of Deaths in Boston*—for the week ending Dec. 2d, 71.—Males, 40—females, 31.—Stillborn, 5. Of consumption, 12—typhus fever, 6—scarlet fever, 8—croup, 7—hooping cough, 1—infantile, 7—dropsy, 2—dropsy on the brain, 3—disease of the heart, 3—dysentery, 3—smallpox, 2—disease of the liver, 1—disease of the stomach, 1—hemorrhage, 1—marasmus, 2—teething, 1—convulsions, 5—bronchitis, 1—accidental, 1—old age, 1—disease of the bowels, 1—inflammation of the lungs, 1—lung fever, 1.

Under 5 years, 32—between 5 and 20 years, 8—between 20 and 40 years, 18—between 40 and 60 years, 9—over 60 years, 4.

## MEDICAL JOURNAL ADVERTISING SHEET.

### MEDICAL SCHOOL OF MAINE.

The Medical Lectures at Bowdoin College will commence on Wednesday, the 14th day of February, 1849.

Theory and Practice of Physic, by WILLIAM SWEETSER, M.D.  
Anatomy and Surgery, by EDMUND R. PEASLEE, M.D.  
Obstetrics, by AMOS NOURSE, M.D.  
Materia Medica, by CHARLES A. LEE, M.D.  
Chemistry and Pharmacy, by PARKER CLEVELAND, M.D.  
Medical Jurisprudence, by HON. JOHN S. TENNEY, M.A.

The Library, containing about 3300 volumes, principally modern works, and the Anatomical Cabinet, are annually increasing.

Every person becoming a member of this institution, is required *previously* to present *satisfactory* evidence of possessing a good moral character.

The amount of fees for the Lectures is \$50, payable in advance. Graduation fee, including Diploma, \$18. The Lectures continue fourteen weeks.

Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

Brunswick, Nov., 1848.

N8—eop6t.

DR. LEWIS will attend to Diseases of the Eye, from 9 to 10 o'clock A. M., every Tuesday, Thursday and Saturday.

Nov17—tf

J. C. NEILSON, M.D.,

SURGEON DENTIST. Office with Dr. J. F. FLAGG, 31 Winter street, BOSTON.

Apr. 12—eplv

### TO PHYSICIANS.

THE Subscriber would most respectfully inform the Physicians of Boston that he has removed his store to the CORNER OF TREMONT AND ELLIOT STREETS, where he will be much pleased to see any of the Faculty who will honor his establishment with a visit. With an experience of twelve years in compounding and dispensing medicines, he hopes by constant attention to business to merit a share of patronage, assuring them that their favors shall be prepared with fidelity, of the purest materials, and by *himself personally*. He will be constantly supplied with all the new preparations as soon as they are out.

J. GEORGE WHITWELL, Apothecary,  
Corner Tremont and Eliot Streets, Boston.

Nov. 10.—eplv

### DISEASES OF THE EYE AND EAR.

DR. J. H. DIX will, from this date, relinquish general practice, and attend exclusively to the medical and surgical treatment of Diseases of the Eye and Ear. Tremont st., opposite Tremont House.

February 14, 1843.

eptf

### TO PHYSICIANS.

THE subscribers are constantly supplied with a selection of *pure medicines* for prescriptions and the use of families, which they will dispense with accuracy to all who may favor them with their patronage. Just received, a lot of pure Extract Taraxaci, prepared by a new and peculiar process. Also a small lot of Ext. Buchu, and Pareira Brava, and all other articles in common use, fresh from the manufacturer.

☞ A constant supply of *Pure Chloroform* and *Sulphuric Ether*, for sale as above.

WHITE & FERGUSON, Successors to CHARLES WHITE,

Dec. 15—1yr.

348 Washington st., cor. Hayward pl. Boston.

### GOODWIN'S SURGICAL SPLINTS.

ASSORTED sizes of the Leg, Knee Joint-arm, Elbow, Hand and Forearm, for sale in sets or parts of sets, at manufacturer's prices, by

JOSEPH BURNETT,

Nov. 1—1y

No. 33 Tremont Row.

### WILLIAM BROWN,

AT his Apothecary store, corner of Washington and Eliot streets, keeps constantly on hand a fresh supply of Medicines, selected expressly for Physicians' and Families' use, including all the English extracts—Conii, Belladonna, Hyocyami, Taraxaci, &c. Also, all the new Chemical preparations recently introduced. Great care is taken in selecting the choicest of medicines for physicians' prescriptions; not trusting to such articles as rhubarb, ipecac, jalap, aloes, &c., powdered by steam and water power, but having them pulverized fresh from the root, under my own superintendence. The most strict personal attention paid to dispensing physicians' prescriptions. No one permitted to put up prescriptions except those of long experience in the business.

Jan. 5—1y

### JOSEPH BURNETT,

APOTHECARY (SUCCESSOR TO T. METCALF), No. 33 TREMONT ROW, OFFERS to Surgeons and Dentists, the best selected assortment of Instruments to be found in the city, consisting in part of Amputating, Trepanning, Obstetrical, Dissecting, Strabismus, Pocket, Eye, and Cooper's Cases; Scarificators, Catheters, Bougies, Stomach Pumps, Injecting do., Spring and Thumb Lancets, Dissecting and Dressing Scissors, Trocars, Needles, Bistouries; Dressing, Dissecting, Polypus and Throat Forceps, Tonsil Instruments, &c. &c., of American, English and French manufacture. Extracting Forceps, of Chevallier's manufacture from Dr. Flagg's patterns, in sets of 12, or singly, of superior form and finish; Excavators, Burrs, Pluggers, Drills, Files; Cutting, Splitting and Punching Forceps; Gold and Platina Plate and Wire, common and fine Solder, Spiral Springs, Gold and Tin Foil, MINERAL TEETH, in great variety, (much the largest assortment to be found in New England), Grindstones, and almost every article used in the surgical or mechanical departments of Dentistry. Instruments sharpened and repaired at short notice.

☞ All orders from the country shall receive careful and prompt attention.

Feb. 10.—tf